

FILED

UNITED STATES DISTRICT COURT, NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISIONPlaintiff(s) Dorothy MurphyCase Number: 08 CV 2027Defendant(s) Fairmont Care CenterJudge: Milton F. Shaly

MOTION FOR APPOINTMENT OF COUNSEL

[NOTE: Failure to complete all items in this form may result in the denial of the motion for appointment of counsel]

1. I, Dorothy Murphy, declare that I am the (check appropriate box)
☒ plaintiff ☐ defendant in the above-entitled proceeding and state that I am unable to afford the services of an attorney, and hereby request the Court to appoint counsel to represent me in this proceeding.

2. In support of my motion, I declare that I have made the following attempts to retain counsel to represent me in this proceeding [NOTE: This item must be completed]: I have apologized to the

- previously appoint of counsel & simply was emotional and I just
ask was there any relation I haven't send no bill for or
William Pitt & since I ask my administrator for my work file
create by please I simply been everywhere can you please reconsider
I went to legal assistance foundation / volunteer legal services my
mandate legal services

3. In further support of my motion, I declare that (check appropriate box):
☒ I am not currently, nor previously have been, represented by an attorney appointed by the Court in this or any other civil or criminal proceeding before this Court.
☐ I am currently, or previously have been, represented by an attorney appointed by the Court in the proceeding(s) described on the back of this page.

4. In further support of my motion, I declare that (check appropriate box):
☒ I have attached an original Application for Leave to Proceed *In Forma Pauperis* in the proceeding detailing my financial status.
☒ I have previously filed an Application for Leave to Proceed *In Forma Pauperis* in this proceeding, and it is a true and correct representation of my financial status.

- ☐ I have previously filed an Application for Leave to Proceed *In Forma Pauperis* in this proceeding. However, my financial status has changed and I have attached an Amended Application to Proceed *In Forma Pauperis* to reflect my current financial status.

5. I declare under penalty that the foregoing is true and correct.

Dorothy Murphy
 Movant's Signature

P.O. Box 10817
 Street Address

7-21-08
 Date

Chicago, IL 60610
 City, State, ZIP

As indicated in paragraph three on the preceding page, I am currently, or previously have been, represented by an attorney appointed by this Court in the civil or criminal actions listed below.

Assigned Judge: _____ Case Number: _____
Case Title: _____
Appointed Attorney's Name: _____
If this case is still pending, please check box ☐

Assigned Judge: _____ Case Number: _____
Case Title: _____
Appointed Attorney's Name: _____
If this case is still pending, please check box ☐

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Appointed Attorney's Name: _____
If this case is still pending, please check box ☐

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Appointed Attorney's Name: _____
If this case is still pending, please check box ☐